

L17000057270

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

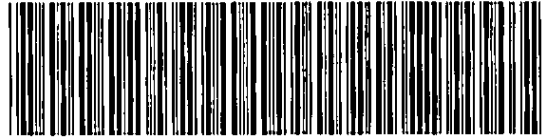
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
DIVISION OF CORPORATION
18 SEP 26 AM 10:38

N COOPER

SEP 28 2018

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: FF BOATING LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

DIANA BLASCHZYK

Name of Person

THOMAS W. HILL & COMPANY, LLC

Firm/Company

1314 LAFAYETTE STREET

Address

CAPE CORAL, FLORIDA 33904

City/State and Zip Code

DBLASCHZYK@HILLCOCPA.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

THOMAS W. HILL

239

549-2444

at (_____) _____

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

FF BOATING LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 03/13/2017 and assigned
Florida document number L17000057270.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

1314 LAFAYETTE STREET
CAPE CORAL, FLORIDA 33904

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1314 LAFAYETTE STREET
CAPE CORAL, FLORIDA 33904

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DIVISION OF CORPORATIONS
SECRETARY OF STATE

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

THOMAS W. HILL

New Registered Office Address:

1314 LAFAYETTE STREET

Enter Florida street address

CAPE CORAL

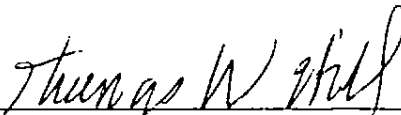
City

Florida 33904

Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.



If Changing Registered Agent, Signature of New Registered Agent

If attending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	HENGGELE, ROLAND P	5002 SW 11TH PLACE	<input type="checkbox"/> Add
		CAPE CORAL, FL 33914	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	HENGGELE, YVES A	5002 SW 11TH PLACE	<input type="checkbox"/> Add
		CAPE CORAL, FL 33914	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	HENGGELE, DOMINIQUE G	5002 SW 11TH PLACE	<input type="checkbox"/> Add
		CAPE CORAL, FL 33914	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	CORAL 24, INC.	1314 LAFAYETTE STREET	<input checked="" type="checkbox"/> Add
		CAPE CORAL, FL 33904	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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SECRETARY OF DEFENSE
DIVISION OF CONSTRUCTION
18 SEP 26 AM 10:38

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated SEPTEMBER 20 2018

✓ D. Henzler
Signature of a parent

Signature of a member or authorized representative of a member

DOMINIQUE G HENGgeler

Typed or printed name of signee